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ORIGINAL RECEIVED**BEFORE THE ARIZONA CORPORATION COMMISSION**

2007 APR 11 P 3:19

cum

COMMISSIONERS

JEFF HATCH-MILLER, Chairman
WILLIAM A. MUNDELL
MIKE GLEASON
KRISTIN K. MAYES
GARY PIERCE

AZ CORP COMMISSION
DOCUMENT CONTROL


IN THE MATTER OF THE APPLICATION OF
ARIZONA-AMERICAN WATER COMPANY,
AN ARIZONA CORPORATION, FOR A
DETERMINATION OF THE CURRENT FAIR
VALUE OF ITS UTILITY PLANT AND
PROPERTY AND FOR INCREASES IN ITS
RATES AND CHARGES BASED THEREON
FOR UTILITY SERVICE BY ITS SUN CITY
WASTEWATER AND SUN CITY WEST
WASTEWATER DISTRICT

DOCKET NO. WS-01303A-06-0491

NOTICE OF FILING**AFFIDAVIT OF CUSTOMER
NOTICE**

1 Arizona-American Water Company hereby files in the above-referenced matter an
2 affidavit that customers were mailed the notice required in the February 15, 2007, Procedural
3 Order.

4 RESPECTFULLY SUBMITTED on April 11, 2007.
5

6
7 Craig A Marks 
8 Craig A. Marks
9 Craig A. Marks, PLC
10 3420 E. Shea Blvd
11 Suite 200
12 Phoenix, Arizona 85028
13 (602) 953-5260
14 Craig.Marks@azbar.org
15 Attorney for Arizona-American Water Company

Arizona Corporation Commission
DOCKETED
APR 11 2007

DOCKETED BY nr

1 Original and 13 copies **filed**
2 on April 11, 2007, with:

3
4 Docket Control
5 Arizona Corporation Commission
6 1200 West Washington
7 Phoenix, Arizona 85007

8
9 Copies of the foregoing **mailed**
10 on April 11, 2007, to:

11
12 Teena Wolfe
13 Administrative Law Judge
14 Arizona Corporation Commission
15 1200 West Washington St.
16 Phoenix, Arizona 85007

17
18 Maureen A. Scott
19 Senior Staff Counsel
20 Arizona Corporation Commission
21 1200 West Washington St.
22 Phoenix, Arizona 85007

23
24 Scott S. Wakefield
25 Chief Counsel
26 Residential Utility Consumer Office
27 1110 West Washington Street
28 Suite 220
29 Phoenix, Arizona 85007

30
31 Tracy Spoon, Executive Director
32 Sun City Taxpayers Association
33 12630 N. 103rd Avenue
34 Suite 144
35 Sun City, Arizona 85351

36
37
38
39 By:


40 Courtney Appelhaus

BEFORE THE ARIZONA CORPORATION COMMISSION

COMMISSIONERS

JEFF HATCH-MILLER, Chairman
WILLIAM A. MUNDELL
MIKE GLEASON
KRISTIN K. MAYES
GARY PIERCE

IN THE MATTER OF THE APPLICATION OF
ARIZONA-AMERICAN WATER COMPANY,
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WASTEWATER AND SUN CITY WEST
WASTEWATER DISTRICT

DOCKET NO. WS-01303A-06-0491

**AFFIDAVIT OF CUSTOMER
NOTICE**

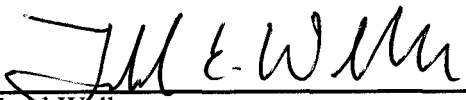
Affidavit of Todd Walker

1
2 1. I am employed by Arizona-American Water Company ("Arizona-American") as
3 its Community Relations Manager.

4 2. Attached as Exhibit A to this Affidavit is a copy of the self mailer I caused to be
5 sent on March 21, 2007, to customers in Arizona-American's Sun City Wastewater District and
6 its Sun City West Wastewater District.

7 3. Exhibit B to this Affidavit is a copy of the March 21, 2007, Postal Statement for
8 Sun City Wastewater customers.

9 4. Exhibit C to this Affidavit is a copy of the March 21, 2007, Postal Statement for
10 Sun City West Wastewater customers.

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12
13
14
15
16


Todd Walker

1 STATE OF Arizona)
2) ss.
3 COUNTY of Maricopa)

4 Subscribed and sworn before me on April 10, 2007.

5
6 Name: Courtney Appelhaus



7
8 My Commission expires: 6/22/10
9

**PUBLIC NOTICE OF HEARING ON THE APPLICATION
OF ARIZONA-AMERICAN WATER COMPANY FOR INCREASES IN ITS
RATES AND CHARGES FOR UTILITY SERVICE BY ITS SUN CITY
WASTEWATER AND SUN CITY WEST WASTEWATER DISTRICTS
DOCKET NO. WS-01303A-06-0491**

On July 28, 2006, Arizona-American Water Company ("Company") filed an application with the Arizona Corporation Commission ("Commission") for an increase in operating income for its Sun City Wastewater District of approximately 35.84 percent (\$1,606,636), and for its Sun City West Wastewater District of approximately 51.50 percent (\$2,337,140). Under the Company's volumetric rate design proposal, a typical residential customer's bill for wastewater service in the Sun City Wastewater District would increase from the current rate of \$10.98 per month to approximately \$15.01 per month (approximately 36.7 percent), depending on usage, and in the Sun City West Wastewater District would increase from the current rate of \$20.56 per month to approximately \$33.60 per month (approximately 63.42 percent), depending on usage. The Commission's Utilities Division Staff has not yet made a recommendation regarding the Company's rate increase proposal, and the Commission will determine the appropriate rate relief to be granted based on the evidence of record in this proceeding. The Commission is not bound by the proposals made by the Company, Staff, or any intervenors and, therefore, the final rates approved in this docket may be lower or higher than the rates described above. Copies of the application and proposed tariffs are available at the Company's offices, 15626 N. Del Webb Blvd, Sun City, Arizona and on the internet via the Commission website (www.azcc.gov) using the e-docket function.

The Commission will hold a hearing on this matter beginning **August 23, 2007, at 10:00 a.m.**, at the Commission's offices, 1200 West Washington, Phoenix, Arizona. Public comments will be taken on the first day of the hearing.

The law provides for an open public hearing at which, under appropriate circumstances, interested parties may intervene. Intervention shall be permitted to any person entitled by law to intervene and having a direct and substantial interest in the matter. If you desire to intervene, you must file a written motion to intervene with the Commission no later than **May 15, 2007**. You must send a copy of the motion to intervene to the Company or its counsel and to all parties of record. Your motion to intervene must contain the following:

1. Your name, address, and telephone number and the name, address and telephone number of any party upon whom service of documents is to be made if not yourself.
2. A short statement of your interest in the proceeding (e.g., a customer of the Company, a shareholder of the Company, etc.).
3. A statement certifying that you have mailed a copy of the motion to intervene to the Company or its counsel and to all parties of record in the case.

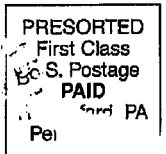
The granting of intervention, among other things, entitles a party to present sworn evidence at the hearing and to cross-examine other witnesses. However, failure to intervene will not preclude any interested person or entity from appearing at the hearing and providing public comment on the application or from filing written comments in the record of the case. You will not receive any further notice of this proceeding unless you request it.

If you have any questions about this application, wish to file written comments on the application, or want further information on intervention, you may contact the Consumer Services Section of the Commission at 1200 West Washington Street, Phoenix, Arizona 85007, or call 1-800-222-7000.

The Commission does not discriminate on the basis of disability in admission to its public meetings. Persons with a disability may request a reasonable accommodation such as a sign language interpreter, as well as request this document in an alternative format, by contacting the ADA Coordinator, Linda Hogan, at LHogan@azcc.gov, voice phone number 602/542-3931. Requests should be made as early as possible to allow time to arrange the accommodation.



15626 N. Del Webb Boulevard
Sun City, AZ 85351



FORWARDING SERVICE REQUESTED

|||||
Todd Walker
15626 N Del Webb Blvd
Sun City AZ 85351-1602

PUBLIC NOTICE OF HEARING ON THE APPLICATION
OF ARIZONA-AMERICAN WATER COMPANY FOR INCREASES IN ITS
RATES AND CHARGES FOR UTILITY SERVICE BY ITS SUN CITY
WASTEWATER AND SUN CITY WEST WASTEWATER DISTRICTS
DOCKET NO. WS-01303A-06-0491

Exhibit B

United States Postal Service
Postage Statement — First-Class Mail & Priority MailUse this form for either First-Class Mail or Priority Mail.
They may not be combined.

MAILER

MAILING

POSTAGE

CERTIFICATION

USPS ONLY

Comments:

USPS: Note Mail Arrival Date & Time

Permit Holder's Name and Address and
Email Address, If AnyTelephone
(610)-933-7400
ExtensionName and Address of
Mailing Agent (If other
than permit holder)
DI Suncity (File 0407099)
Job #30324Telephone
() -
ExtensionName and Address of Individual or
Organization for Which Mailing Is Prepared
(If other than permit holder)
Arizona American Water
15626 N. Del Webb Blvd.
Sun City AZ 85351CAPS Cust Ref No. _____
Dun & Bradstreet No. _____

Dun & Bradstreet No. _____

Dun & Bradstreet No. _____

Post Office of Mailing
Royerford, PA 19468

Processing Category

☒ Letters☐ Flats☐ Automation Flats (DMM 301.3)☐ Parcels

Mailing Date

3/20/2007

Fed. Agency Cost Code

Weight of a Single Piece
0.0125 pounds

Statement Seq. No.

DIRECT

No. & Type of Containers

1' MM Trays 8

2' MM Trays 27

2' EMM Trays 35

Total Trays

Flat Trays

Sacks

Pallets

Type of Postage ☒ Permit Imprint
☐ Precanceled Stamps
☐ MeteredPermit #
539

For Mail Enclosed Within Another Class

☐ Periodicals☐ Standard Mail ☐ Bound Printed Matter ☐ Library Mail ☐ Media Mail ☐ Parcel PostTotal Weight
287.7750For Automation Rate Pieces, Enter Date of Address
Matching and Coding (DMM 708.3.3)
3/20/2007For Automation Carrier Route Rate Pieces, Enter Date
of Address Matching and Coding (DMM 708.3.3)
3/20/2007Parts Completed (Select all that apply) ☒ A ☐ B ☒ C ☐ D ☐ E ☐ F ☐ S

Total Postage (Add Parts Totals)

6,869.52

Rate at Which Postage Affixed (Check one) (DMM 234, 334, 434)

☐ Correct ☐ Lowest ☐ Neither

pcs. x \$

= Postage Affixed

Net Postage Due (Subtract postage affixed from total postage)

For USPS Use Only: Additional Postage Payment (State reason)

For postage affixed add additional payment to net postage due.
For permit imprint add additional payment to total postage.

Total Adjusted Postage Affixed

Permit Imprint Only: Check One ☐ AIC 121 (First-Class Mail)
PM: Report Total Postage to AIC ☐ AIC 237 (Priority Mail)

Total Adjusted Postage Permit Imprint

The mailer's signature certifies acceptance of liability for and agreement to pay any revenue deficiencies assessed on this mailing, subject to appeal. If an agent signs this form, the agent certifies that he or she is authorized to sign on behalf of the mailer, and that the mailer is bound by the certification and agrees to pay any deficiencies. In addition, agents may be liable for any deficiencies resulting from matters within their responsibility, knowledge, or control.

The mailer hereby certifies that all information furnished on this form is accurate, truthful, and complete; that the mail and the supporting documentation comply with all postal standards and that the mailing qualifies for the rates and fees claimed; and that the mailing does not contain any matter prohibited by law or postal regulation.

I understand that anyone who furnishes false or misleading information on this form or who omits information requested on this form may be subject to criminal and/or civil penalties, including fines and imprisonment.

Privacy Notice: For information regarding our Privacy Policy visit www.usps.com.

Signature of Mailer or Agent

Printed Name of Mailer or Agent Signing Form

Telephone

Extension

Weight of a Single Piece

pounds

Are postage figures left adjusted from mailer's entries? ☐ Yes ☐ No

If Yes, state reason:

Total Pieces

Total Weight

Total Postage

Check One

☐ Presort Verification☐ Presort Verification

Not Scheduled

Performed as Scheduled

Date Mailer Notified

Contact

By (Initials)

I CERTIFY that this mailing has been inspected concerning: (1) eligibility for postage rates claimed; (2) proper preparation (and presort where required); (3) proper completion of postage statement; and (4) payment of annual fee (if required).

Verifying Employee's Signature

Print Verifying Employee's Name

Time

AM

PM

Round Stamp (Required)

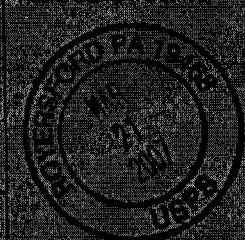


Exhibit C

United States Postal Service
Postage Statement — First-Class Mail & Priority MailUse this form for either First-Class Mail or Priority Mail.
They may not be combined.

Comments:

USPS: Note Mail Arrival Date & Time

MAILER	Permit Holder's Name and Address and Email Address, if Any	Telephone (610) 933-7400 Extension	Name and Address of Mailing Agent (If other than permit holder) DI Suncity (File 0407150) Job #30324	Telephone () - Extension	Name and Address of Individual or Organization for Which Mailing Is Prepared (If other than permit holder) Arizona American Water 15626 N. Del Webb Blvd. Sun City AZ 85351
	CAPS Cust Ref No. _____ Dun & Bradstreet No. _____		Dun & Bradstreet No. _____		Dun & Bradstreet No. _____
MAILING	Post Office of Mailing Royersford, PA 19468	Processing Category <input checked="" type="checkbox"/> Letters <input type="checkbox"/> Flats <input type="checkbox"/> Automation Flats (DMM 301.3) <input type="checkbox"/> Parcels	Mailing Date 3/20/2007	Fed. Agency Cost Code	Statement Seq. No. DIRECT
	Type of Postage <input checked="" type="checkbox"/> Permit Imprint <input type="checkbox"/> Precanceled Stamps <input type="checkbox"/> Metered		Weight of a Single Piece 0.0125 pounds		No. & Type of Containers 1' MM Trays 8 2' MM Trays 16 Total Pieces 15,401 Total Trays 22 Flat Trays Sacks Pallets
	Permit # 539	For Mail Enclosed Within Another Class <input type="checkbox"/> Standard Mail <input type="checkbox"/> Bound Printed Matter <input type="checkbox"/> Library Mail <input type="checkbox"/> Media Mail <input type="checkbox"/> Parcel Post			Total Weight 192.5125
	For Automation Rate Pieces, Enter Date of Address Matching and Coding (DMM 708.3.3) 3/20/2007	For Automation Carrier Route Rate Pieces, Enter Date of Address Matching and Coding (DMM 708.3.3) 3/20/2007			

Parts Completed (Select all that apply) ☒ A ☐ B ☒ C ☐ D ☐ E ☐ F ☐ S

POSTAGE	Total Postage (Add Parts Totals)		4,586.83
	Rate at Which Postage Affixed (Check one) (DMM 234, 334, 434) <input type="checkbox"/> Correct <input type="checkbox"/> Lowest <input type="checkbox"/> Neither	pcs. x \$	= Postage Affixed
	Net Postage Due (Subtract postage affixed from total postage)		
	For USPS Use Only: Additional Postage Payment (State reason)		
	Total Adjusted Postage Affixed		
Permit Imprint Only - Check One <input type="checkbox"/> AIC 121 (First-Class Mail) RM: Report Total Postage In AIC <input type="checkbox"/> AIC 237 (Priority Mail)		Total Adjusted Postage Permit Imprint	

CERTIFICATION: The mailer's signature certifies acceptance of liability for and agreement to pay any revenue deficiencies assessed on this mailing, subject to appeal. If an agent signs this form, the agent certifies that he or she is authorized to sign on behalf of the mailer, and that the mailer is bound by the certification and agrees to pay any deficiencies. In addition, agents may be liable for any deficiencies resulting from matters within their responsibility, knowledge, or control.

The mailer hereby certifies that all information furnished on this form is accurate, truthful, and complete; that the mail and the supporting documentation comply with all postal standards and that the mailing qualifies for the rates and fees claimed; and that the mailing does not contain any matter prohibited by law or postal regulation.

I understand that anyone who furnishes false or misleading information on this form or who omits information requested on this form may be subject to criminal and/or civil penalties, including fines and imprisonment.

Privacy Notice: For information regarding our Privacy Policy visit www.usps.com.

USPS ONLY	Signature of Mailer or Agent	Printed Name of Mailer or Agent Signing Form	Telephone
			Extension
	Weight of a Single Piece _____ pound	Are postage figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes" state reason:	
	Total Pieces	Total Weight	
	Total Postage		
Check One <input type="checkbox"/> Pre-sort Verification Not Scheduled	<input type="checkbox"/> Pre-sort Verification Performed as Scheduled	Date Mailer Notified	Contact
By (Initials)			
I CERTIFY that this mailing has been inspected concerning: (1) eligibility for postage rates claimed; (2) proper preparation (and pre-sort where required); (3) proper completion of postage statement; and (4) payment of annual fee (if required).			
Verifying Employee's Signature	Print Verifying Employee's Name	Time	AM PM